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Bib Data Sheet

CONFIRMATION NO. 7918

SERIAL NUMBER 10/809,966	FILING DATE 03/26/2004 RULE	CLASS 250	GROUP ART UNIT 2884	ATTORNEY DOCKET NO. P04,0088
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

GERMANY 103 13 602.9 03/26/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/07/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>Mary Zettl</i> Initials: <i>umz</i>	GERMANY	3	25	2

ADDRESS

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TITLE

Device to measure a radiation dose

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)